ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
	340		G.19.22	
FEE DETERMINATION	HY		7,77,00	
O.I.P.E. CLASSIFIER	Inso	45	9/28	
FORMALITY REVIEW	FH	TC 856	10-24-00	
RESPONSE FORMALITY REVIEW	B 45	573	0326-01	
	V			

INDEX OF CLAIMS

Rejected	N Non-elected
= Allowed	I Interference
(Through numeral) Canceled	A Appeal
± Restricted	O Objected

		Restricted			
Claim	Date	Claim	Date	Claim	Date
1 1 12		<u> </u>		Final	
Signal Signal	.	Final State		Final	
1173		51 V 7		101	
2/1/		52 1		102	
		53 1		103	
4 1		54 10		104	
5 1/1		55 /		105	
6 10		56 1/		106	 - - - - -
7 1/2		_ 57 1		107	╇╇┋
8 7		58 🗸 🦯			╎╸╎╸╎╸╎╸
9 40		59 🗸 🧻		109	
10 🗸 🖊		60 🗸		111	
11 V		61 /		112	
12		62 /		113	
13 🗸	 	 		114	
14 1	 	65 /	++++	115	
15 1	 	66 7		116	
16 /		- 67 V		117	
17 17	 	68 1		118	
19 7		69 V		119	
20 7	 	70 1		120	
1	╏┋	71/1		121	
21 1	┤ ┼┼┼┼┼	- 72		122	
23 1		- 37		123	
24		74 /		124	
25 1		75		125	
26		76		126	
27 1		77		127	
28 1		78		128	
29		79		130	++++
30 10		80		131	
31 1/		81	++++++++++++++++++++++++++++++++++++	132	++++
32 / /	 	82	 	133	
33 7 0	 	84	 	134	
	┸┼┼┼	85		135	
35 🗸	┼┤╸┤╶ ┼	86	 	136	
1 1 1 1 1	┦┦┩┦	87		137	
37 🗸	┤╸┤╶┤╶┤╶ ┤	88		138	
	 	89		139	
1 1 1	 	90		140	
/ P 	┼┼┼┼ ┼	91	1-1-1-1-1-1	141	
41 1	┨╸╏╺╏╶╏╸╏╸╏╸	92	 	142	
43 1	╎┪╸╎╸ ┤┈┼┈┼╸	93	 - - - - - - - - - - - - - - - - - - -	143	
44 1	┤╎ ┼╾┼╌┼─	94		144	
45 1	 	95		145	
46 1	1 	96		146	
47	 	97		147	
48 3 /	 	98		148	
(49)	 	99		149	 - - - - -
50 1		100		150	<u> </u>

If more than 150 claims or 10 actions staple additional sheet here

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BEST AVAILABLE COPY